PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number DECLARATION FOR UTILITY OR First Named Inventor DESIGN Gilbert E. Haury, et al. PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) **Application Number** Filing Date Declaration Declaration Herewith 4 OR Submitted after Initial Submitted Art Unit With Initial Filing (surcharge (37 CFR 1.16 (e)) Filing **Examiner Name** required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: COLLAPSIBLE CONVEYANCE FOLDING TRANSPORT CHAIR FOLDING WHEELCHAIR (Title of the Invention) the specification of which 6/ is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International and was amended on (MM/DD/YYYY) Application Number (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. Foreign Filing Date Certified Copy Attach d? **Prior Foreign Application Priority** Country (MM/DD/YYYY) Number(s) **Not Claimed** Yes Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Given Name				- Gudon I	1	Family	Name	Haur	
(first and middle [if any]) Gilber	l C.					or Sum	ame		
Inventor's									Date
Inventor's Signature Wilbert C. Residence: City	House								1-23-04
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NAME OF SECOND INVENTO	R:				Αp	etition	has be	en filed f	or this unsigned inventor
Given Name (first and middle [if any]) Mark J. Family Name or Sumame Quintile									
Inventor's Signature		·····		-	!_				Date
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Brunswick	Offic			<u> </u>					
Mailing Address 719 Salem	Lane								
City Brunswick	State				ZIP	40.45	_	Count	try U.S.
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST IN	VENTOR:		□ A p	etition h	nas bee	en filed fo	r this	unsian	ed inventor
Given Name (first and middle [if any]) Gilbe	rt E.		<u> </u>	A petition has been filed for this unsigned inventor Family Name or Surname Haury					
Inventor's Signature					•				Date
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City Grafton	State Ohio				ZIP 4	4044			Country U.S.
NAME OF SECOND INVENTO	R:				A pe	tition has	beer	n filed fo	or this unsigned inventor
Given Name (first and middle [if any]) Mark J.				Family Name or Surname Quintile					
Inventor's Signature	M								1-26-04
Residence: Offy Brunswick	State / Ohio			Count	try U.S	3.		Citizer	nship U.S.
Mailing Address 719 Salem Lane									
City Brunswick	State Ohio				ZIP 44	212		Counti	ry U.S.
Additional inventors or a legal re	presentative are bei	ng named on t	hes	suppleme	ntal shee	et(s) PTO/SE	3/02A	or 02LR a	attached hereto.

PTO/SB/81 (09-03)

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DOWED OF ATTORNEY	Filing Date	
POWER OF ATTORNEY	First Named Inventor	Gilbert E. Haury, et al.
and	Title	COLLAPSIBLE CONVEYANCE
CORRESPONDENCE ADDRESS	Art Unit	
INDICATION FORM	Examiner Name	

Attorney Docket Number

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I here	by appoint:				_	
~	Practitioners associated with the Customer Number:	37287				
	Practitioner(s) named below:					
	Name			Registration	Number	
	Name					
as m\	/our attorney(s) or agent(s) to prosecute the application	identified	above, and to transa	act all business	in the Un	ited States Patent and
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l <u>a</u> m	the:					
V	Applicant/Inventor.					
	Assignee of record of the entire interest. See 37 CFI	R 3.71.				
	Statement under 37 CFR 3.73(b) is enclosed. (Form	PTO/SB	/96)			
			nt or Assignee of R	Record		
Nam	Gilbert E. Haury					
Signa						
Date	1.23.04			Telephone	216.62	3.0150
NOTE	:: Signatures of all the inventors or assignees of record of the en if more than one signature is required, see below*.	itire interes	t or their representative	e(s) are required.	Submit muli	tiple
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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	Intradort diffess it disprays a value owns control named.
Filing Date	
First Named Inventor	Gilbert E. Haury, et al.
Title	COLLAPSIBLE CONVEYANCE
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereb	y appoint:							
		with the Customer Number:	37287					
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
			•	it or Assignee of	f Record			
Name	Mark J, Quintile	20 11						
Signature Mad (MM)								
Date		1-26-04			Telephone	216.623.0150		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
V	*Total of 2 forms are submitted.							

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